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** CONTINUING DATA **********

This application is a CIP of 09/898,885 07/03/2001 ABN

YES, SH

** FOREIGN APPLICATIONS **********

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 02/13/2004

Foreign Priority claimed	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
☐ yes ☒ no	OH	2	22	5

35 USC 119 (a-d) conditions met: ☐ yes ☐ no ☐ Met after Allowance

Verified and Acknowledged: Examiner's Signature _____ Initials SH

ADDRESS
26875

TITLE

Compounds for dual photodiagnosis and therapy

FILING FEE RECEIVED		
1108	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other _____ ☐ Credit